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Details:

(FORM UPDATED: 08/11/2010)

WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

2009-10

(session year)

Senate

(Assembly, Senate or Joint)

Committee on ... Public Health, Senior Issues, Long-Term Care, and Job Creation (SC-PHSILTCJC)

COMMITTEE NOTICES ...

- Committee Reports ... CR
- Executive Sessions ... ES
- Public Hearings ... PH

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... Appt (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... CRule (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)

(ab = Assembly Bill)

(ar = Assembly Resolution)

(ajr = Assembly Joint Resolution)

(sb = Senate Bill)

(**sr** = Senate Resolution)

(sir = Senate Joint Resolution)

Miscellaneous ... Misc

Page 1 of 1

Dear Representative Black,

As a complementary health care provider, I would like to bring to your attention to how the new bill SB 394 to expand the definition of dietetics to include 'nutrition care services' is a political attempt to give exclusive rights only to licensed dieticians under the guise of 'consumer protection'. SB 394 would innappropriately and detrimentally expand the scope of practice for dieticians, who often do not have the knowlege of herbal supplementation for improving health, especially in chronic conditions that can potentially be reversed; like other complementary and alternative providers do. Certified Nutritional Consultants, Naturopaths and other complementary care providers go through rigorous 2-4 year programs that are recognized through national certification boards with strict criteria so they can help people in our society reach a higher level of optimal health.

Conventional and Complementry can and should work side by side to help improve peoples lives rather than fight against one another. In a State that sets many progressive new paths, this is very important and needs careful attention, so that this bill DOES NOT PASS, which is a step in the wrong direction for the State and People of Wisconsin who depend on, and have the right to choose what is best for them. This bill sends the wrong message and would over-regulate that which would help many, by giving exclusive power and control to a particular group that is not necessarily as informed as many others in the area of nutrition and health. This is not what government is suppose to be used for but all to often is.

There are 6 other states that have safe laws that protect consumer access to practitioners who provide complementary and alternative services. Wisconsin needs a broader exemption to to protect consumers access to the many nutritional and healing modalities already available in this great state. The current exemption (b) does not securely protect existing health care practitioners enough from criminal charges for practicing nutritional care and education services. This is essential to be protected in order to help many by offering that freedom of choice.

Many small businesses statewide who help many people and generate much state revenue would have to fold and relocate to continue if this narrow bill gets passed within the next week. An open-minded and spiritual approach vesus a controlling and monetary approach is in the best interest of all people who seek to improve their current level of health. With the increasing statistics of degenerating health in this country, modalities geared toward nutrition should be allowed to be explored and chosen by the people in this state.

Sincerely,

Jeffrey G. Karls Certified Colon Therapist





WISCONSIN LEGISLATIVE COUNCIL

Terry C. Anderson, Director Laura D. Rose, Deputy Director

TO:

SENATOR KATHLEEN VINEHOUT

FROM:

Richard Sweet, Senior Staff Attorney

RE:

Use of the Title "Nutritionist" Under LRBs0090/2, a Proposed Senate Substitute Amendment

to 2009 Senate Bill 115

DATE:

September 14, 2009

This memorandum responds to the question of whether a person may use the title "nutritionist" if the person is not licensed as a dietitian nutritionist under LRBs0090/2. That draft is a proposed substitute amendment to 2009 Senate Bill 115 and relates to licensure of dietitian nutritionists. As described below, the proposed substitute amendment does not prohibit an unlicensed person from using the title "nutritionist," so long as that term is not used in conjunction with other specified terms.

Current law provides that, with certain exceptions, a person who is not a certified dietitian may not designate himself or herself as a dietitian, claim to provide dietetic services, or use any title or initials that represent or may tend to represent the person as certified or licensed as a dietitian or as certified or licensed in a nutrition-related field.

Senate Bill 115 provides that, with certain exceptions, a person who is not licensed as a dietitian or nutritionist may not designate himself or herself as a dietitian or nutritionist, or use other specified titles or initials. Therefore, under the bill, an unlicensed person would be prohibited from designating himself or herself as a "nutritionist."

The proposed Senate substitute amendment, LRBs0090/2, provides that, with certain exceptions, a person who is not licensed as a dietitian nutritionist may not designate himself or herself as a dietitian nutritionist; or use or assume specified titles (dietitian, certified dietitian, licensed dietitian, certified nutritionist, licensed nutritionist, dietitian nutritionist, certified dietitian nutritionist, or licensed dietitian nutritionist). In addition, such a person may not append to his or her name the letters "L.D.," "L.N.," or "L.D.N."; or "use any title or initials that represent or may tend to represent the person as certified or licensed as a dietitian nutritionist or as certified or licensed in a nutrition-related field." Therefore, under the proposed substitute amendment, an unlicensed person may use the title "nutritionist," so long as the person does not use that title in conjunction with the words "licensed," "certified," or "dietitian," or use any title or initials that represent or may tend to represent the person as certified or licensed in a nutrition-related field.

Feel free to contact me if I can be of further assistance.

RNS:jal



Organizations Supporting Senate Bill 115

Organizations registered in support of SB 115 with the WI GAB:

- Wisconsin Dietetic Association
- Wisconsin Medical Society
- Children's Hospital & Health System
- Wisconsin Nurses Association
- American Heart Association
- Wisconsin Public Health Association
- Wisconsin Association of Local Health Departments & Boards
- School Nutrition Association of Wisconsin
- Wisconsin Health Care Association

Other organizations that publicly support SB 115:

- UW Hospital & Clinics
- ThedaCare
- Affinity Healthcare
- Bellin Health
- Gundersen Lutheran Medical Center Nutrition Department
- Wisconsin Partnership for Activity and Nutrition (WIPAN)
- Wisconsin Diabetes Advisory Group
- Wisconsin WIC Association
- Northeast WI Association of Diabetes Educators (NEWADE)
- West Central Wisconsin Chapter of the American Association of Diabetes Educators (WCWAADE)



NORTHWOODS WHOLISTIC HEALTH PRACTICE

KEVIN R. BRANHAM, D. C., Board Certified Diplomates in Diagnosis and Internal Disorders (D.A.B.C.I.), Clinical Nutrition (D.A.C.B.N.); Board of Gov. of MAHO 5680 Cloverland Drive, Eagle River, Wisconsin 54521 (715)479-9066

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METABOLIC DISEASE and ALKALINE-ACID FOOD CHART

Balanced body chemistry, also called homeostasis or equilibrium, is essential for maintaining health and to correct nearly all chronic disease. Acidosis, or over-acidity in the body tissues, is a basic cause of most disease—arthritic, rheumatic, circulatory, digestive, cancer, congestion, allergy conditions and long lasting malfunctioning body systems.

The body "burns" all foods as it combines them with oxygen. This body combustion leaves an ash. The food ash can be neutral, acid or alkaline, greatly depending on the leftover mineral makeup of the original foods. Some foods, especially animal protein or 'tired soil' foods, leave an acid residue or ash, which are lower in mineral content. Richer mineral laden foods leave an alkaline ash, especially plant foods. The excess acid ash (metabolic acidosis) results when the natural alkali reserve your mother's body gave your baby body becomes depleted and not adequately added to during your growing years or maintained as an adult. The excess life stresses, toxic foods, chemicals, and addictive habits, plus illness episodes, injuries, pregnancies, upheavals all use up alkaline reserves—especially those minerals stored in the bone marrow. This also uses up what small reserve supply of fixed bases or minerals are in the blood and body tissues.

Thus, it is vitally important that a proper ratio exists between alkaline and acid foods in the diet. The natural ratio in a normal healthy body is approximately 4 parts alkaline to one part acid, or 80% to 20%. When this ideal ratio is maintained, the body strongly resists disease. When one heals the disease of metabolic acidosis, the ratio of alkaline elements in the diet becomes higher; and recovery is faster. Many people have become vegetarian or have streamlined the previously garbage-based diets and lifestyles and have felt better. Acids are neutralized by alkalis. Thus, it is important in the treatment of most diseases that the patient's diet includes plenty of alkaline-ash foods to counteract the effect of acid-forming foods and leave a safe margin of alkalinity. The natural pH of the blood and cells is slightly alkaline.

Using pH test paper to check saliva and the urine is a quick way to see if your body is too acid. A pH of 7 is neutral and below that is acid (more yellow color) while above that is alkaline (more green and even blue). In general, the saliva reflects the body tissues and the urine reflects the balancing effort of your body. If the saliva is MORE ACID (yellow) than the urine, you are RETAINING ACID and reducing or running out your alkaline reserves.

Again, a healthy body maintains large reserves of alkali, used to meet the crucial demands if too many acid-producing foods and life's stresses are taken in. However, these normal reserves can be depleted. When the desired alkaline-acid ratio falls to 3 to 1, health can be seriously threatened. The body can function normally and hold on to health only with the presence of adequate alkaline reserves and the proper acid-alkaline ration in ALL the body blood and tissues.

For optimum health and the greatest resistance to disease, it is imperative that one's diet is higher or over-alkaline. The best ratio, is about 80% alkali-producing foods and 20% acid-producing foods in the summer or warm season/climate and 60% alkaline- to 40% acid-producing food ratio in the cold season/climate.

Following are tables of common foods with an approximate potential alkalinity or acidity, as present in one ounce of food. Remember, high alkalinity comes from mineral contents, especially potassium, calcium and magnesium and from crops grown on mineral rich soils.

KEVIN R. BRANHAM, D. C., Board Certified Diplomates in Diagnosis & Clinical Nutrition, p. 2

METABOLIC DISEASE and ALKALINE-ACID FOOD CHART

ALKALI-FORMING FOODS

Figs	30.0	Potatoes	2.0
Soybeans	12.0	Pineapple	2.0
Lima beans	12.0	Cabbage	1.8
Apricots	9.5	Grapefruit	1.7
Spinach	8.0	Tomatoes	1.7
Turnip or beettops	8.0	Peaches	1.5
Raisins	7.0	Apples	1.0
Almonds	3.6	Grapes	1.0
Carrots	3.5	Bananas	1.0
Dates	3.0	Watermelon	1.0
Celery	2.5	Millet	0.5
Cucumber	2.5	Brazil nuts	0.5
Cantaloupe	2.5	Coconuts	0.5
Lettuce	2.2	Buckwheat	0.5
Watercress	2.0		

NEUTRAL (OR NEAR-NEUTRAL) ASH FOODS

Milk	Vegetable oils
Butter	White sugar

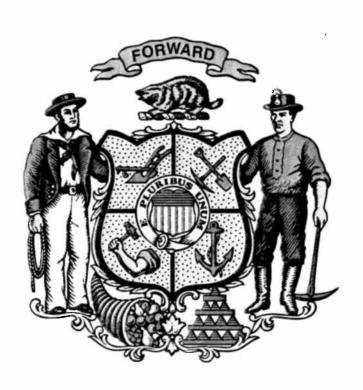
ACID-FORMING FOODS

Oysters	5.0	Rice	2.5
Veal	3.5	Whole wheat or rye bread	2.5
Most fish	3.5	Most nuts, except almonds	
Organ meats	3.0	and Brazil nuts	2.0
Liver	3.0	Natural cheese	1.5
Chicken	3.0	Lentils	1.5
Most meats and fowl	3.0	Peanuts	1.0
Eggs	3.0		
Most grains	3.0		

Most grains are acid-forming, except millet and buckwheat, which are considered to be alkaline. Sprouted seeds and grains become more alkaline in the process of sprouting.

All vegetable and fruit juices are highly alkaline. The most alkali-forming juices are: fig juice, green juices of all green vegetables and tops, carrot, beet, celery, pineapple and to a much lesser degree, citrus juices. Vegetable broth is an extremely alkalizing drink.

-- Chart from Paavo, Airola, Ph.D., HOW TO GET WELL.



Comments on Wisconsin's Natural Health Service Providers

Please note this list is not all inclusive. It is a sampling of some providers in the state of Wisconsin. Estimated numbers are marked with an asterisk.

Type of Provider	Comments	Numbers
Naturopathic Doctors	Traditional naturopathic doctors provide nutrition-based suggestions as a part of their approach.	25*
Nutritionists	Wisconsin nutritionists practice natural nutrition, not dietetics.	600*
Homeopaths	These providers also advise on nutrition	50
Herbalists	Wisconsin has a long history of herbal healing	70*
Health Food Stores	Consumers depend on health food stores for specific nutrition information	140
Aromatherapists	These providers also advise on nutrition	unknown
Ethnic Healers	Chinese, Ayurveda, Native American, Hmong healers etc.	unknown
Nutrition Coaches	There are many nutrition coaches providing service in many different venues	unknown
Weight Loss Coaches	Weight Watchers, LA Weight Loss, Curves, Jenny Craig, Over Eaters Anonymous, TOPS (Take Off Pounds Sensibly), weight loss centers and programs, etc.	unknown
Network Marketers	At least 14 companies operating in Wisconsin	15,000*
Organic Farms	Also advise on nutrition	807
Natural Health Schools	4 schools with Wisconsin enrollees	786*
Natural Supplement	Wisconsin based major companies with national and international presence	6
Natural Nutrition	Wisconsin based wholesale suppliers	2
Wisconsin Weston A. Price Chapters	20 Wisconsin chapters dedicated to restoring nutrient-dense foods to the human diet through education	183*
Verified and Estimated		17,669





WISCONSIN STATE LEGISLATURE



Wisconsin Health Freedom Coalition PO Box 53 Sheldon, WI 54766

> Syncha Maniscalco: synchaa@gmail.com 715-452-5566 Susan Klingeisen: klingeisen@aol.com 920-766-7208

WIHFC.com

A Wisconsin 501(c) (4) Non Profit Corporation Lobbying for Consumer Choice

Wisconsin Health Freedom Coalition Protects
Wisconsin
Citizens'
Access
to Natural
Health
Services

LRB-1002/P1 August 29, 2009

Out-of-pocket costs for CAM (Complimentary and Alternative Medicine) \$33.9 billion

National Health Statistics Reports Number 18 July 30, 2009

In 2007, 40% of adults in the United States spent **\$33.9 billion** out of pocket on visits to CAM practitioners and purchases of CAM products, classes, and materials. (For a market comparison: Coca Cola and Pepsi sales total **\$60.1 billion**.)

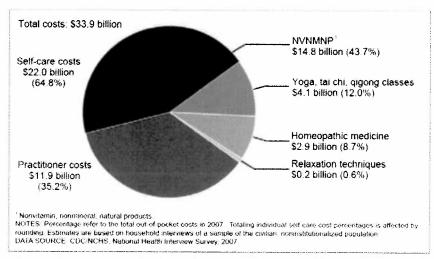


Figure. Out-of-pocket costs for complementary and alternative medicine among adults aged 18 years and over: United States, 2007

- \$22.0 billion on self-care costs
- \$14.8 billion spent on non-vitamin, non-mineral natural products
- \$11.9 out-of-pocket (OOP) on practitioners such as chiropractic, osteopathic manipulation, naturopathy and chelation therapy
- \$4.1 billion on yoga (equal to 12% of the total)
- \$2.9 billion on homeopathy
- \$0.2 billion on relaxation techniques



WHAT WILL THE CONSUMER HEALTH FREEDOM BILL DO FOR WISCONSIN CITIZENS?

- Protect Wisconsin health seekers' rights to access natural and nutritional healing protocols.
- Maintain public access to unlicensed natural health providers.
- Protect natural health providers from being prosecuted for providing advice and services that do no harm.
- Maintain public access to persons who sell nutrition supplements or provide nutrition education.
- Protect traditional, cultural therapies and remedies practiced historically by persons who are not licensed or regulated by the state.
- Protect natural health traditions, information, and practices for generations to come.





Examples of Wisconsin Natural Health Services Protected by the Bill

- Naturopathic Doctors
- Nutritionists
- Homeopathy Practitioners
- Holistic Health Practitioners
- Herbalists
- Health Food Stores
- Aromatherapists
- Ethnic Healers
- Nutrition Coaches
- Weight Loss Coaches
- Athletic Trainers
- Network-based Nutritional Supplement Retailers
- Organic & Conventional Farmers
- Those who sell nutritional supplements.
- Those who provide nutritional education.





Wisconsin's 16,000+ Natural Health Service Providers

Please note this list is not all inclusive. It is a sampling of some providers in the state of Wisconsin. Estimated numbers are marked with an asterisk.

Type of Provider	Comments	Numbers
Naturopathic Doctors	Traditional naturopathic doctors provide nutrition-based suggestions as a part of their approach.	25*
Nutritionists	Wisconsin nutritionists practice natural nutrition, not dietetics.	600*
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Ethnic Healers	Chinese, Ayurveda, Native American, Hmong healers etc.	unknown
Nutrition Coaches	There are many nutrition coaches providing service in many different venues	unknown
Nutrition Retailers	At least 14 companies, plus a large number of home businesses operating in Wisconsin	15,000*
Natural Health Schools	Wisconsin enrollees in 4 schools	786*
Natural Supplement	Wisconsin-based major companies with national and international presence	6
Natural Nutrition Distributors	Wisconsin-based wholesale suppliers	2
Wisconsin Weston A. Price Chapters	20 Wisconsin chapters dedicated to restoring nutrient-dense foods to the human diet through education	183*
Total	Verified plus estimated	>16,862*



Minnesota, California, Rhode Island,

Louisiana, Idaho, Oklahoma, and

New Mexico have enacted

Health Freedom legislation.

It is now time to enact a similar Health

Freedom law in Wisconsin.









Wisconsin Safe Harbor Exemption Bill Draft Sept 9, 09

SECTION 1. 146.86 of the statutes is created to read:

146.86 Provision of certain services related to health. (1) In this section:

- (a) "Controlled substance" has the meaning given in s. 961.01 (4).
- (b) "Deliver" has the meaning given in s. 450.01 (5).
- (c) "Device" has the meaning given in s. 450.01 (6).
- (d) "Dispense" has the meaning given in s. 450.01 (7).
- (e) "Health care professional" means any of the following:
- 1. An individual who acts within the scope of his or her applicable license, registration, permit, or certification and to whom any of the following applies:
- a. Is licensed as a tattooist under s. 252.23.
- b. Is licensed as a body piercer under s. 252.24.
- c. Is licensed or permitted as an emergency medical technician under s. 256.15 (5).
- d. Is certified for performance of defibrillation under s. 256.15 (6g).
- e. Is certified as a first responder under s. 256.15 (8).
- f. Has a license, permit, or certificate of certification or registration that is issued under subch. VII, XI, or XII of ch. 440 or under ch. 441, 446, 447, 448, 449, 450, 451, 454, 455, 457, 459, or 460.
- 2. An individual who acts within the scope of a state-approved training and testing program and meets requirements for a feeding assistant under s. 146.40 (1) (aw).
- 3. An individual who acts within the scope of an approved instruction program and an approved competency evaluation program and meets requirements for a nurse aide under s. 146.40 (2).
- (h) "Health care practitioner" means an individual who provides health care services, but who is not a health care professional.
- (i) "Prescription drug" has the meaning given in s. 450.01 (20).
- (2) Notwithstanding ss. 252.23 (3), 252.24 (3), 256.15 (2) and (5) (d), 440.88 (5) and (6), 440.98 (8) and (9), 440.982 (1), 441.06 (4), 441.15 (2), 446.02 (1), 447.03 (1) and (2), 448.03 (1) (a), (b), and (c) and (1m), 448.51 (1), 448.61, 448.961 (1) and (2), 449.02 (1), 450.03 (1), 451.04 (1), 454.04, 455.02, 457.04, 459.02 (1), 459.24 (1), and 460.02, a health care practitioner who provides to an individual services related to health does not violate s. 252.23 (3), 252.24 (3), 256.15 (2) or (5) (d), 440.982 (1), 441.06 (4), 441.15 (2), 446.02 (1), 447.03 (1) or (2), 448.03 (1) (a), (b), or (c) or (1m), 448.51 (1), 448.61, 448.961 (1) and (2), 449.02 (1), 450.03 (1), 451.04 (1), 454.04, 455.02, 457.04,

459.02 (1), 459.24 (1), or 460.02, and is not subject to action under s. 440.98 (8) or (9),

Wisconsin Safe Harbor Exemption Bill Draft Sept 9, 09

unless he or she does any of the following:

- (a) Punctures the skin, except by pricking a finger for purposes of blood screening.
- (b) Prescribes or administers X-ray services.
- (c) Prescribes, directly applies, delivers, or dispenses a device that may be prescribed, directly applied, delivered, or dispensed only by a health care professional, a prescription drug, or a controlled substance.
- (d) Performs a chiropractic adjustment or manipulation of joints or a spine.
- (e) Recommends to the individual that he or she discontinue treatment that is prescribed by a health care professional.
- (f) Diagnoses and treats a health condition of the individual so as to cause an imminent and significant risk of discernable and significant physical or mental injury under circumstances that the health practitioner reasonably would know would result in such an injury. None of the following is a diagnosis prohibited under this paragraph:
- 1. Use by a health practitioner of medical terminology or common words to describe a health condition.
- 2. Advice by a health practitioner that the individual consult a health care professional in order to rule out a potentially diagnosable condition.
- 3. A statement by a health practitioner that the individual's symptoms may be indicative of or consistent with a specific medical condition.
- (g) Holds himself or herself out as or implies that he or she is a health care professional.
- (3) A health practitioner who charges a fee for health services shall, before providing the services, do all of the following:
- (a) Provide to the individual to be served, in a written statement, all of the following information:
- 1. The health practitioner's name, business address, and telephone number.
- 2. The fact that the health practitioner is not a health care professional.
- 3. The nature of the health services the health practitioner proposes to provide to the individual.
- 4. The education, training, experience, credentials, or other qualifications, if any, of the health practitioner with respect to the health care services the health practitioner proposes to provide to the individual.
- (b) Post in a prominent location in the office or treatment location of the health practitioner a copy of a statement, printed in not less than 12-point boldface type, that contains all of the following information:
- 1. The health practitioner's name, business address, and telephone number.

Wisconsin Safe Harbor Exemption Bill Draft Sept 9, 09

- 2. The fact that the health practitioner is not a health care professional.
- 3. The nature of the health services the health practitioner generally provides.
- 4. The education, training, experience, credentials, or other qualifications, if any, of the health practitioner with respect to the health care services specified under subd. 3.
- (c) The health practitioner shall attempt to ensure that individuals who cannot read, who have communication impairments, or who do not read or speak English or the language of the health practitioner are able to understand the statements under pars. (a) and (b).
- (d) Before initially providing health services to an individual, obtain a written acknowledgment from the individual stating that he or she has been provided the statement described under par.
- (a) and provide the individual with a copy of the acknowledgment. The health practitioner shall maintain the acknowledgment for 2 years as a confidential health document.
- (e) If the information under par. (a) 1. or 2. changes, the health practitioner shall change the statement under par. (a) accordingly, shall post the changed statement as required under par. (b), and, for each individual served after the statement is changed, shall comply with pars. (a) and (d).
- (f) Disclosing information to a client under the requirement of this section regarding a degree lawfully gained does not constitute a violation of Wisconsin statute.
- (4) (a) Except as provided in par. (g), the department, after holding a public hearing under par. (b), may issue a special order against any person requiring him or her to cease and desist from an act, practice, or omission that the department determines violates this section. The order is subject to judicial review under ch. 227. Any violation of a special order issued under this paragraph is punishable as contempt under ch. 785 in the manner provided for disobedience of a lawful order of a court, upon the filing of an affidavit by the department of the violation in the circuit court of the county in which the violation occurred.
- (b) The department, in any matter relating to issuing, revoking, or amending a special order relating to a named person, shall serve upon the person complained against a complaint in the name of the department and a notice of public hearing on the complaint to be held not sooner than 10 days after the service. After the notice is served, the person may not act, practice, or omit to act as described in the complaint. The person complained against may be heard in person or by agent or attorney and is entitled to process to compel the attendance of witnesses.

- (c) Complaint, notice, order, or other process of the department may be served as may be a summons, a subpoena may be served as provided by s. 885.03, and either may be served by registered mail to the person's address. Service may be proved by affidavit or by the post—office return receipt, in which case the time of service is the date borne by the receipt.
- (d) Testimony presented and proceedings at a hearing under par. (b) shall be recorded and when necessary shall be transcribed. The secretary shall make his or her findings and determination on the testimony. The department shall make rules of procedure and practice not inconsistent with any law governing the procedure or practice.
- (e) In addition to or in lieu of any other remedies under this subsection, the department may apply to a circuit court for a temporary or permanent injunction to prevent, restrain, or enjoin any person from violating this section or any special order of the department issued under par (a), without being compelled to allege or prove that an adequate remedy at law does not exist.
- (f) Any person suffering pecuniary loss because of a violation of this section may sue for damages in any circuit court and may recover treble the amount of the pecuniary loss, together with costs, including reasonable attorney fees.
- (g) For a violation of sub. (3), the department shall employ an educational or mediative approach to bring the violator into compliance. If the department determines that this approach has failed, the department may issue a special order under par. (a).
- (5) This section does not apply to the act of a person practicing Christian Science treatment or who, under s. 895.48, is exempt.
 (END)

Wisconsin Consumer

Health Freedom Bill

Freedom of Choice for

Natural Health

Services

Minnesota, California, Rhode Island, Louisiana, Idaho, Oklahoma, and New Mexico have enacted Health Freedom legislation.

WIHFC, PO Box 53, Sheldon, WI 54766

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WIHFC.com

A Wisconsin 501(c) (4) Non Profit Corporation Lobbying for Consumer Choice Wisconsin Consumer Health Freedom Bill

To Protect
Freedom of Speech and
Freedom for Natural
Health Choice

Wisconsin
Health
Freedom
Coalition

The Spirit of a Consumer

Health Freedom Bill is to give

Wisconsin consumers

freedom of choice in healthcare by

protecting natural health providers

from unwarranted prosecution.

Wisconsin Health Freedom Coalition

HOW A CONSUMER HEALTH FREEDOM BILL WORKS

WHAT WILL THE CONSUMER HEALTH FREEDOM BILL DO FOR WISCONSIN CITIZENS?

- Protect Wisconsin health seekers' rights to access natural and nutritional healing protocols
- Maintain public access to unlicensed natural health providers who will not be prosecuted for providing advice and services that do no harm
- Maintain public access to persons who sell nutrition supplements or provide nutrition education who will not be charged with practicing medicine without a license.
- Protect traditional, cultural therapies and remedies practiced historically by persons who are not licensed or regulated by the state
- Protect natural health traditions, information, and practices for generations to come



BENEFITS OF CONSUMER HEALTH FREEDOM BILL

- Lower health care costs and access to natural health care practitioners.
- Citizens take responsibility for their health and improve their lifestyles when they pay for services out of pocket.
- Removal of fear from prosecution by licensing boards for natural providers.
- See LRB-1002/P1 for details.



Examples of Wisconsin Natural Health Services Protected by the Bill

- Naturopathic Doctors
- Nutritionists
- Homeopathy Practitioners
- Holistic Health Practitioners
- Herbalists
- Health Food Stores
- Aromatherapists
- Ethnic Healers
- Nutrition Coaches
- Weight Loss Coaches
- Athletic Trainers
- Network Marketers
- Organic & Conventional Farmers
- Those who sell nutritional supplements.
- Those who provide nutritional education.



HOW THE PUBLIC IS PROTECTED

Minnesota, California,
Rhode Island,
Louisiana, Idaho,
Oklahoma, and New
Mexico have enacted
Health Freedom
legislation
that
Protects Consumer Access
to unlicensed Natural Health
service providers AND
provides guidelines for how
to prosecute a natural



WIHFC.COM



WISCONSIN STATE LEGISLATURE



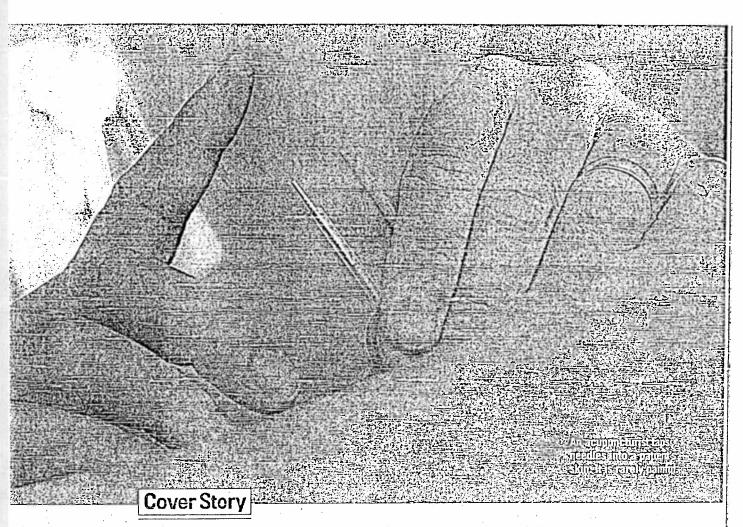
SWORD REPORT

Aliternative Medicine - Goes Walnstream

Top hospitals are now embracing such unconventional techniques as acupuncture, homeopathy, and energy healing.

Do they really work? What patients need to know





Embracing Alternative Care

TOP HOSPITALS PUT UNORTHODOX THERAPIES INTO PRACTICE

By Avery Comarow

o be blunt, if my wife and I didn't think it was helping him, we wouldn't have continued with it," says Dan Polley. He's talking about Mikey, the Polleys' 2¹/2-year-old in the next room, who was diagnosed with acute lymphocytic leukemia when he was 6 months old. Chemotherapy, radiation, and a bone marrow transplant have been crucial elements of Mikey's treatment. But the "it" his father speaks of is nothing like these aggressive, costly, and heav-

ily researched exemplars of western care—it is a kind of touch therapy, from the camp of alternative medicine. Gentle and benign, "healing touch" is intended to rebalance the energy field that its practitioners believe surrounds the body and flows through it along defined pathways, affecting health when disrupted. Several times a week, therapist Lynne Morrison spends 20 minutes unblocking and smoothing Mikey's energy field, which energy healers like Morrison say they can feel and correct.

Before a recent session, Mikey was grouchy, drawing up his legs and issuing periodic yowls. His stomach hurt, said his father. But as the little boy



nestled in his father's arms and Morrison moved her hands around his body, lightly resting them here and then there, his tenseness loosened and he quieted for a few minutes at

a time. The Polleys believe that the therapy not only calms their son but is aiding his return to health.

The setting for the unorthodox therapy—an academic medical center would have been startling just five or 10 years ago. Morrison is on the staff of Children's Memorial Hospital in Chicago, a hard-nosed, tough-cases,

research-oriented emblem of western medicine. It perennially ranks among America's premier hospitals and is the principal pediatric teaching hospital for Northwestern University's Feinberg School of Medicine. And Mikey is only one of many children there receiving care that not long ago was called alternative medicine. Now it is more often called CAM, for complementary and alternative medicine, or integrative medicine, to avoid the loaded "alternative." The message the new labels are meant to convey is that the therapies more often go hand in hand with traditional medicine than substitute for it.

Children's Memorial is just one of many academic hospitals where

unconventional therapies have found a home. Elite centers like the Mayo Clinic, Duke University Medical Center, and the University of California-San Francisco now offer acupuncture, massage, and other CAM services. All 18 hospitals on *U.S. News*'s most recent "America's Best Hospitals" superselective Honor Roll provide CAM of some type. Fifteen

of the 18 also belong to the three-yearold Consortium of Academic Health Centers for Integrative Medicine, 36 U.S. teaching hospitals pushing to blend CAM with traditional care.

Thicket of therapies. Each center has its own notion of CAM and how best to fit it into the medical mix, which can be challenging. "There is rarely a consensus among CAM experts on the optimal product, dose, or intended users," states a report from the National Center for Complementary and Alternative Medicine, an arm of the National Institutes of Health charged with doling out research funds and tidying

the thicket of therapies deemed to fall within CAM's broad reach.

At one extreme are found techniques such as yoga and massage, acknowledged by the most hard-line skeptics to have some bencfit, if only to lower stress and anxiety. At the other are therapies that even many who applaud CAM's newfound academic popularity call "woo-woo medicine" because of the sheer implausibility of their rationale. Homeopathy (box, Page 38), which involves remedies often lacking a single molecule of active substance, is the poster

ENGINE BENEVIOLE

WHAT IS IT? An "energy therapy" that is said to rebalance the body's qi, or energy flow, to relieve stress and discomfort. The practitioner moves her hands around or on the patient's body to evaluate his energy field and then smooths out imbalances with further hand motions ("healing touch") or actual touching ("therapeutic touch"). SUPPORTERS SAY: Touch theraby has an undisputed healing role. In a 2003 study, for example, healing touch lowered pain, blood pressure, fatigue, and

emotional problems in cancer patients getting chemotherapy. CRITICS SAY: Benefits may be attributable to the effects of relaxation, and the basic premise is dubious. In an experiment described in 1998 in the Journal of the American Medical Association, 21 practitioners failed a test to see if they could consistently detect the energy field of an investigator's hand positioned over one of their own. RISKS: Minimal—a few reports of headaches, crying, anxiety. dizziness, and nausea.

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child; some would add energy therapies such as healing touch. The broad middle takes in acupuncture, herbal medicine, and other CAM approaches that seem to benefit some people with certain conditions.

Until the mid-1990s, most academic centers treated CAM like a pack of scruffy mutts, noisy and unworthy of notice. A large pot of federal and foundation research funds-now close to \$250 million per year just from NCCAM and the National Cancer Institute, plus tens of millions more from private donors such as the Bravewell Collaborativehelped turn that sniffy attitude into solicitous attention, says longtime CAM commentator Donald Marcus. "The funding gave them respect from the medical school community," says Marcus, a professor of medicine and immunology at **Baylor College of Medicine** in Houston, where he has

long taught a CAM course. A survey of hospitals found that 27 percent offered CAM in 2005, up from 8 percent in 1998. At the Cleveland Clinic, for example, NIH money is behind a clinical trial to see whether reiki (box, Page 40), another energy therapy, can reduce stress and anxiety in prostate cancer patients.

The integrative medicine program at Children's Memorial got off the ground in 2003 with \$1.7 million in foundation

seed money and is now chasing NIH grants. David Steinhorn, a pediatric intensivist and medical director of the hospital's CAM program, says several privately funded trials, including Mikey's, are underway or in the works. Steinhern is

a passionate champion of investigating CAM therapies, no matter how unlikely, if he believes they may help patients and are safe. "I'm a very serious, hardcore ICU doctor, but I have seen these therapies benefit my patients, even if I don't know how," he says.

Patient access. CAM's ascendance isn't entirely driven by money-researchers make frequent references to obligation. "We want patients to have access to these therapies in a responsible fashion," says Lisa Corbin, medical director of the Cen-

WHAT IS IT? A traditional Chinese energy therapy. Fine needles are inserted into the skin-10 or so in a typical session-at points called meridians to free blocked ai.

SUPPORTERS SAY: Acupuncture's proven neurobiological effect has been widely shown to help relieve pain and nausea and improve function-for example, to ease postoperative and chemotherapy-related nausea and vomiting. In a 2004 study, acupuncture patients with osteoarthritis of the knee had less pain and an increased range of motion.

CRITICS SAY: In studies of patients who get either acupuncture or a sham version, the genuine treatment is rarely more effective: A recent study of lowerback pain showed that real and sham acupuncture worked about the same. RISKS: Very low, mostly brief side effects such as pain, fainting, or nauséa. A few cases of meningitis, collapsed lung, and heart damage have been reported. Most states require disposable needles, so infections are rare.



ter for Integrative Medicine at the University of Colorado Hospital. That implies a public clamor for such services, and patients may indeed talk about and ask for CAM more than they used to (although that isn't clear). But surveys showing widespread use-like one issued by the Centers for Disease Control and Prevention in 2004 reporting that 62 percent of adult Americans had used some form of CAM in the previous year-

touch therapy to the kind of test demanded by CAM critics: Prove that it can produce medical results beyond simply reducing stress or anxiety. Children having a bone marrow transplant are being divided into two groups. One will receive the therapy before and in the weeks after the marrow transplant. The other group will be visited on the same schedule by staff or volunteers who talk, read, or color with them. (The investigators won't know

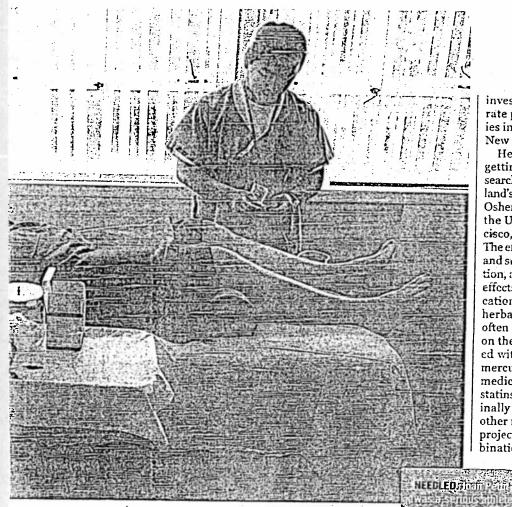
Most academic centers used to treat alternative therapies like a pack of scruffy mutts, noisy and unworthy of notice.

are highly misleading. The big numbers | reflect activities such as prayer, which few would consider CAM, and meditation, now routinely prescribed to help lower high blood pressure. The Atkins and Zone diets ("diet-based therapies") were counted in the CDC survey, too. A more selective reading indicates that about 5 percent used yoga, 1.1 percent acupuncture, and 0.5 percent energy therapy, to pick three more-representative offerings.

The purpose of Mikey's trial is to put his

which children are in which group.) The working presumption, says Steinhorn, is that the energy-therapy group will take up the transplanted bone marrow stem cells more readily and with fewer complications, allowing those children to leave the hospital sooner. Early findings should be available by the end of this year.

Most academic hospitals are fairly conservative when it comes to CAM; the usual menu offers acupuncture, yoga, meditation, and variations on massage such as reiki. This tracks the philosophy of An-



drew Weil, founder of the University of Arizona Program in Integrative Medicine and CAM's public face, if there is one. "I teach and urge people to use a sliding scale of cvidence," says Weil. "The greater the potential to cause harm, the greater the standard of evidence should be."

A few CAM treatments have demonstrated at least modest results. Massage shows promise for relieving postoperative pain. It was once part of routine postsurgical care, in fact, but was gradually shelved as other demands on nurses' time took priority. And studies demonstrate that acupuncture is somewhat effective at relieving nausea from chemotherapy or surgery and discomfort from dental procedures. It is used at Memorial Sloan-Kettering Cancer Center in New York, among others, for relief of chemotherapy-related nausea, and at many centers for chronic pain—from arthritis, for example.

Damaged and arthritic knees drove Joan Pettit in 2006 to see an acupuncturist at the University of Maryland School of Medicine Center for Integrative Medicine. The 51-year-old suburban Baltimore resident had been a competitive athlete from her high school days and played tennis until about eight years ago,

when both knees would swell and throb painfully. "I'm always looking for something that doesn't have serious side effects," says Pettit, "so the idea of

trying acupuncture was very appealing."

The pain and swelling lessened somewhat, and Pettit, a lawyer, returned for repeat sessions—partly, she admits, because they were so soothing: "It's a very pleasant experience. You lie down, they put a nice warm lamp on you, you fall asleep for half an hour, nice music." But she knew the acupuncture was treating the symptoms, not the cause, and she would ultimately face knee replacement. "I still think it gives some pain relief when there's a flare-up," she said last month, "but I've given up. I'm having replacement surgery in April."

Varied results. Disconcertingly, some of acupuncture's claimed successes seem related to the nationality of study authors. A 1998 analysis of 252 published trials found that 51 of the 52 studies conducted by researchers from Asian countries, where acupuncture is uncontroversial, were positive—a 98 percent success rate. Only 53 percent of the trials run by U.S.

investigators showed success, and the rate plummeted to 30 percent in studies involving Canadian, Australian, and New Zealand researchers.

Herbals and dietary supplements are getting considerable attention from researchers, and they're employed at Maryland's integrative medicine center and the Osher Center for Integrative Medicine at the University of California-San Francisco, among other academic hospitals. The effectiveness of most herbal remedies and supplements is largely an open question, and there are issues of toxicity, side effects, and interaction with other medications. Actual dosages in off-the-shelf herbal medications and supplements often are far different from those shown on the label, and the pills may be tainted with heavy metals such as lead and mercury. Yet many of today's powerful medications, among them aspirin, statins, and anticancer drugs, were originally unearthed from trees, fungi, and other natural sources. NCI-backed CAM projects include a test of a six-herb combination, used in traditional Chinese

medicine, for its ability to prevent lung cancer, and addition of mistletoe extract to chemotherapy to treat solid tumors.

Yoga, a physical activity, has understandable benefits for cancer patients, in whom it helps restore strength and flexibility to muscles weak-

ened by treatment. Alicia Chin has been taking a weekly yoga class for cancer patients at the Osher Center. "Yoga reteaches the muscles how to work, and it makes me feel good," says Chin, a 46-year-old San Franciscan. She had a lumpectomy and had two lymph glands removed last March, followed by radiation, and now is enrolled in a clinical trial of a new chemotherapy regimen. "You get all these drugs pumped into you, you don't want to do anything," says Chin, a paralegal. She still doesn't have the strength to reach up and paint a ceiling, as she puts it, "but it really makes a difference."

Most CAM therapies remain relatively untested, and the majority of academic centers tiptoe around those that seem especially shaky. "We should always insist on a high standard," says Brent Bauer, director of the Mayo Clinic's complementary and integrative medicine program. CAM therapies for cancer patients at Memorial Sloan-Kettering "have to be ra-



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Cover Story

tional, and they have to be evidencebased," says Barrie Cassileth, chief of the integrative medicine service and coauthor of the Alternative Medicine Handbook for physicians and other caregivers. Homeopathy is "absurd," she says. "It's like a religion." Nor does she put much faith in energy healing: "Manipulating someone's energy field is nonsense." And while acupuncture is offered at Sloan-Kettering, "we don't do it thinking we're stimulating a vital force-we know we are releasing substances from the brain that make people feel better."

Why not try? Still, some academic hospitals give patients access to highly controversial therapies. Thomas Jefferson University Hospital in Philadelphia and Maryland's integrative medicine center, for example, provide homeopathic services. And patients at Oregon Health and

Science University Hospital in Portland and the University of Pittsburgh Medical Center can see a naturopath (box, below), generally a non-M.D. who advocates nonmedical aids such as proper nutrition, colonic irrigation (a polite term for enemas), and special water baths to

stay healthy without drugs or surgery. Those who work in academic CAM programs freely concede there is much about CAM that they do not comprehend-yet-but they also argue that | with my patients?"

the standards of western A counterargument posed by many

medicine should not block

its use. Just because all of the evidence isn't in, says Donald Abrams, director of clinical programs at UCSF's Osher Center, "should I never try these therapies critics is that the risks of some therapies are real and the benefits illusory-a placebo effect. That is, even a treatment that does nothing genuine is likely to make you feel better (or worse) if you think it will.

The phenomenon is hardly unique to

A Mixed Bag of Alternative Remedies

his handful of uncon-ventional practices only hints at the only hints at the breadth of the spectrum. Journals, guidebooks, government resources, and private publications and websites provided the information.

HERBALS AND DIETARY SUPPLEMENTS. Herbals such as echinacea for colds are a key element of traditional Chinese medicine. Dietary supplements range from vitamins and minerals to melatonin for insomnia and psyllium for cholesterol. Pro/con: Some herbals, such as green tea and flaxseed,

may turn out to have significant benefits, but few have been rigorously tested for effectiveness, and their safety, purity, and potency are loosely monitored. Dietary supplements also are understudied. Vitamin E for heart health was shown to add rather than reduce risk; glucosamine and chondroitin, however, hold promise for moderate-tosevere knee osteoarthritis.

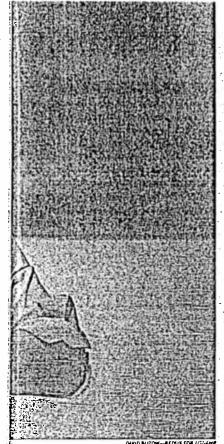
HOMEOPATHY. To treat a malady, a tiny amount of a substance is administered that in large doses would induce symptoms like those caused by the illness-for

flu, say, something that would cause nausea. The substance often is diluted in water to the point that it is undetectable. The water is said to "remember" it. Pro/con: Supporters say that homeopathy is safe and often helpful, so gold-standard proof is unnecessary. Large, systematic studies have failed to show its effectiveness for any condition.

MAGNET THERAPY. Permanent magnets (like those in refrigerator magnets) embedded in items such as straps, shoe inserts, and mattress pads are used to treat pain.

Pro/con: The purported benefits have been attributed to the magnetic field's effect on cell function or blood flow. A recent analysis of numerous studies, however, found that for any of several conditions studied, magnets were no better than a placebo. Experts warn that magnets might affect implanted devices such as insulin pumps or pacemakers.

REFLEXOLOGY. Reflexologists believe specific spots on the bottom of the feet are linked to other parts of the body, and massage or applying pressure to a part of the foot addresses problems in the associated organ. Pro/con: Reflexology has been shown in preliminary



CAM. Physicians used to hand out inert pills routinely to treat aches and pains. Many still do. A new study found that almost half of the doctors at three Chicago-area medical schools who responded to a survey said they had used a placebo in their practice at least once for anx-

WHAT IS IT? A set of ritualized relaxation and breathing techniques, body positions, and movements derived from Indian philosophy, emphasizing harmony between mind, body, and spirit.

SUPPORTERS SAY: Some studies report that cancer patients who do yoga sleep better and have improved quality of life and lower stress. A study published last month concluded that an intensive yoga program improved the overall health of a small group of adults, reducing stress, anxiety, and depression. And yoga has been found to relieve symptoms of asthma, heart disease, depression, epilepsy, lower-back pain, fatigue, and headache. CRITICS SAY: Evidence of such benefits is thin and mixed. A 2005 study found that yoga provided no significant benefit for those with mild-to-moderate asthma. RISKS: Small but real. Overstretching can cause injury or worsen an existing medical problem. Cases of stroke, blood vessel blockage, and damage to the eye, nerves, and spine have been reported.

iety, pain, and other problems. About 1 in 12 reported having done so more than 10 times in the past year.

If CAM's successes are due mostly to placebo, writes biostatistician R. Barker Bausell in Snake Oil Science, a just published book that turns an analytical eye on CAM, not everybody who seeks some form of CAM for a throbbing hip or chronic headache will be happy if he paid (probably out of pocket) for care that only fooled him into feeling better. Health insurers generally cover only a few types of CAM, such as acupuncture, and then only for certain conditions.

As research director of the University of Maryland's CAM center from 1999 to 2004, Bausell became disillusioned when none of several rigorous trials that he helped design demonstrated any benefit to CAM. "The results were no better than placebo," he says. "Zip. So I started asking myself, What if there's nothing to this?'

Here is where the argument gets sticky, because the placebo effect often is, well, effective, notes Don Price, a neuroscience professor at the University of Florida who has made the phenomenon his specialty for more than 30 years. In a major review of the placebo effect published this month, he cites two telling studies reported in 2005 and 2007. In both, patients with various aches and pains received either real acupuncture or a sham procedure that felt like acupuncture; the patients didn't know which one they had gotten. Patients in one study were asked if they thought they had received real or fake acupuncture. Pain relief was greater for those who thought they had gotten the real thing, even if they hadn't, than for patients who thought they had got-



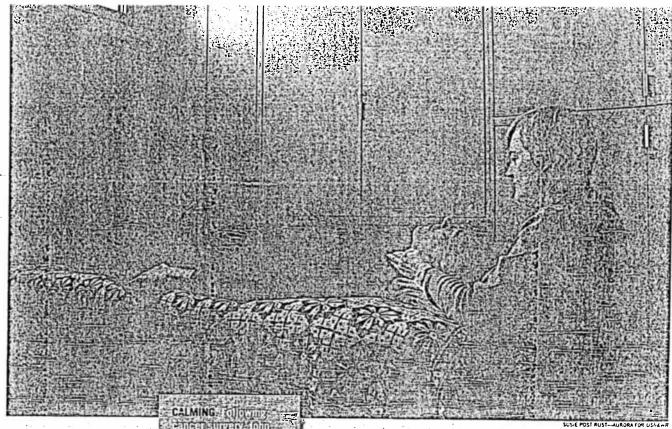
In reflexology, parts of the foot are thought to be linked to organs.

studies to ease headache pain, severity of premenstrual symptoms, and, in cancer patients, anxiety.

But the evidence that it counters specific diseases is weak. Experts urge caution with foot conditions such as unhealed wounds, a recent fracture, or active gout.

MEDITATION. Tuning out the everyday by finding a peaceful place and focusing inward on a word, an idea, or the act of breathing is a form of deep relaxation that may have health benefits beyond lowering stress. Pro/con: An analysis of 311 studies found that the strongest and most consistent benefits were lowered heart rate, blood pressure, and cholesterol. But its authors declined to draw firm conclusions because the studies were not methodologically sound and the results varied widely by the study design and the kind of meditation.

NATUROPATHY. An overall approach to health emphasizing natural prevention and care. It draws on both conventional and unconventional practices, including nutrition, exercise, herbals, and homeopathy. Pro/con: Naturopathy promotes a healthful lifestyle by encouraging sound cating habits, physical activity, and contact with nature. But some naturopaths oppose certain childhood vaccinations. And enemalike colonic irrigation, a cleansing therapy favored by many naturopaths, carries a small risk of infection (and a tiny one of bowel perforation) with little if any evidence that it helps, -Lindsay Lyon and January W. Payne



ten the sham version. In the other study, patients were asked how strongly they believed that acupuncture would help them. The stronger their belief, the better the re-

sults-whichever treatment they got.

"These folks are very careful to make the distinction between what is based on evidence and what is based on anecdotes," says John Munce, a 53-year-old management consultant from Charlotte, N.C., who is receiving reiki and acupuncture at the Duke Center for Integrative Medicine following surgery

for neck cancer in October. "But I don't care. If it's a placebo, give me the damn placebo." The reiki sessions have restored much of the mobility in his shoulder after a nerve had to be cut during surgery, he says, and he values the psychic benefits equally. "I feel as if the reiki is aligning me to heal," says Munce.

CAM frequently gets undeserved credit because of the natural course of illness, say experts. Most of those who seek out CAM, says Bausell, have chronic problems, perhaps arthritic knee pain or fre-

quent headaches, that follow a predictable cycle: build, peak, and recede. Sufferers tend to seek help when their pain is building, and when the pain, as if by

magic, begins to recede after they are treated, it is natural to connect the improvement with the therapy.

Won over. Cycles and disputes over illusory cures don't grab Tracy Gaudet. If a treatment works and isn't harmful, says the Durham, N.C., obstetrician-gynecologist, be thankful. Before having a golf-ball-size mass removed from her

neck about three years ago, Gaudet prepped with acupuncture, art therapy, and hypnosis to relieve her symptoms and mentally prepare for the operation. She awoke pain free and never took so much as a Tylenol afterward.

As executive director of Duke Integrative Medicine, Gaudet was especially receptive to CAM. "She was incredibly relaxed," says Duke otolaryngologist David Witsell, Gaudet's surgeon. "It took very little anesthetic to get her to sleep." And while it can take six months after this procedure to relearn how to swallow and speak, "she was smiling and talking and drinking and

laughing the day after surgery," says the surgeon. He and Gaudet recently discussed making the program's CAM services available to all preoperative patients. "That experience with her turned me on to integrative medicine," says Witsell.

"From where I sit," says Gaudet in the center's light-filled lobby, "if we could figure out a way to elicit a full therapeutic response to a placebo, that's not a bad thing-that's a good thing." She considers briefly, then smiles. "I'd call it an 'activated healing response," she says. o

WHAT IS IT? One of many traditional Asian energy therapies based on rebalancing the life force known as qi after illness, surgery, stress, or other disruption. The therapist's hands are placed at each of 12 to 15 specified points for a few minutes to read and rechannel the patient's qi.

SUPPORTERS SAY: Reiki can treat pain and myriad other health conditions. In a small 2003 study, reiki plus standard pain drugs relieved pain and improved quality of life in one

group of cancer patients more than drugs and rest did in another group. Other evidence indicates it may reduce symptoms of psychological distress. CRITICS SAY: Reiki is soothing. which helps relieve stress and anxiety, but its ability to treat specific medical conditions is unsubstantiated. A 2002 study concluded that it didn't help stroke victims recover better or faster. Evidence that gi exists or works as described is absent. RISKS: Light touching seems completely innocuous.